DATED:		
Mr. Michael Shuttlesworth Office of Land and Water Resources P. O. Box 2309 Jackson, MS 39289-0631		
Re: Well Driller's License Application of I	Mr	
Dear Mr. Shuttlesworth:		
I have personally supervised, or otherwise have applicant's qualifying work experience as a driller signature, that Mr contained in Mississippi Code, Annotated, Section years qualifying experience as a driller. Therefore processed and that he be issued a Mississippi Description.	r. I do hereby affirm, as evidenced by my meets all of the requirements on 51-5-3, including the minimum of three re, I recommend that his application be	y
Sincerely,		
Signature of Reference	Printed Name of Reference	
(If signed by a licensed driller include:)		
Well Driller's License No		
Licensing State		
NOTARY: STATE OF		
COUNTY OF		
THIS DAY,	, personally came and appeared be urisdiction.	fore the
SWORN to and subscribed before me on this the	e day of,	20
	NOTARY PUBLIC	-
My Commission Expires:		

Playton/lwmdeq/(I:)Libraries/Documents/Affidavit Form Letter for Driller's Restricted License 1/29/2015